

# CADRE ORIENTATION NON-MEDICAL ATTENDANT TRAINING

Cadre Course  
Nurse Case Manager Course

*"The views, opinions and findings contained in this report are those of the authors(s) and should not be construed as an official Department of the Army position, policy or decision, unless so designated by other official documentation."*



# OBJECTIVES

- Identify Soldier eligibility requirements for a Non-Medical Attendant.
- Discuss Non-Medical Attendant entitlements.
- Discuss Non-Medical Attendant duties/responsibilities.
- Differentiate between Non-Medical Attendants and SCAADL Programs.
- Identify Non-Medical Attendant Requirements related to pay.
- Describe the process by which a Soldier receives a Non-Medical Attendant, and how the requirement is stopped.

# NON-MEDICAL ATTENDANTS



# WHAT IS A NON-MEDICAL ATTENDANT

- A Non-Medical Attendant (NMA) is an individual whose presence may contribute to the health and welfare of the Soldier
- The individual is selected by the Soldier **AND**
- Determined by the primary physician and the military medical facility commander **to be appropriate** to serve as a NMA





## WHO IS ELIGIBLE FOR A NMA?



- The decision to permit a Soldier to have a NMA is based upon the Soldier's medical need
  - Per the JFTR, a Soldier, as a result of a wound, illness, or injury, has been determined by a physician or surgeon to be in a category known as "*seriously wounded, ill or injured (SI)*" or "*very seriously wounded, ill, injured (VSI)*" **AND**
  - Is hospitalized for treatment of the wound, illness, or injury; or requires continuing outpatient treatment for the wound, illness, or injury.



## WHY WOULD A SOLDIER NEED A NMA?

- Many Soldiers need additional support as they recovery, rehabilitate, and transition
  - In non-WTU units, Soldiers often receive support from unit assets or their spouses/Families.
  - In WTUs/CBWTUs, fellow Soldiers have their own recoveries to focus on and cadre are tied up managing other Soldiers.
- Non-Medical Attendants provide support while Soldiers face the challenges of recovery and transition



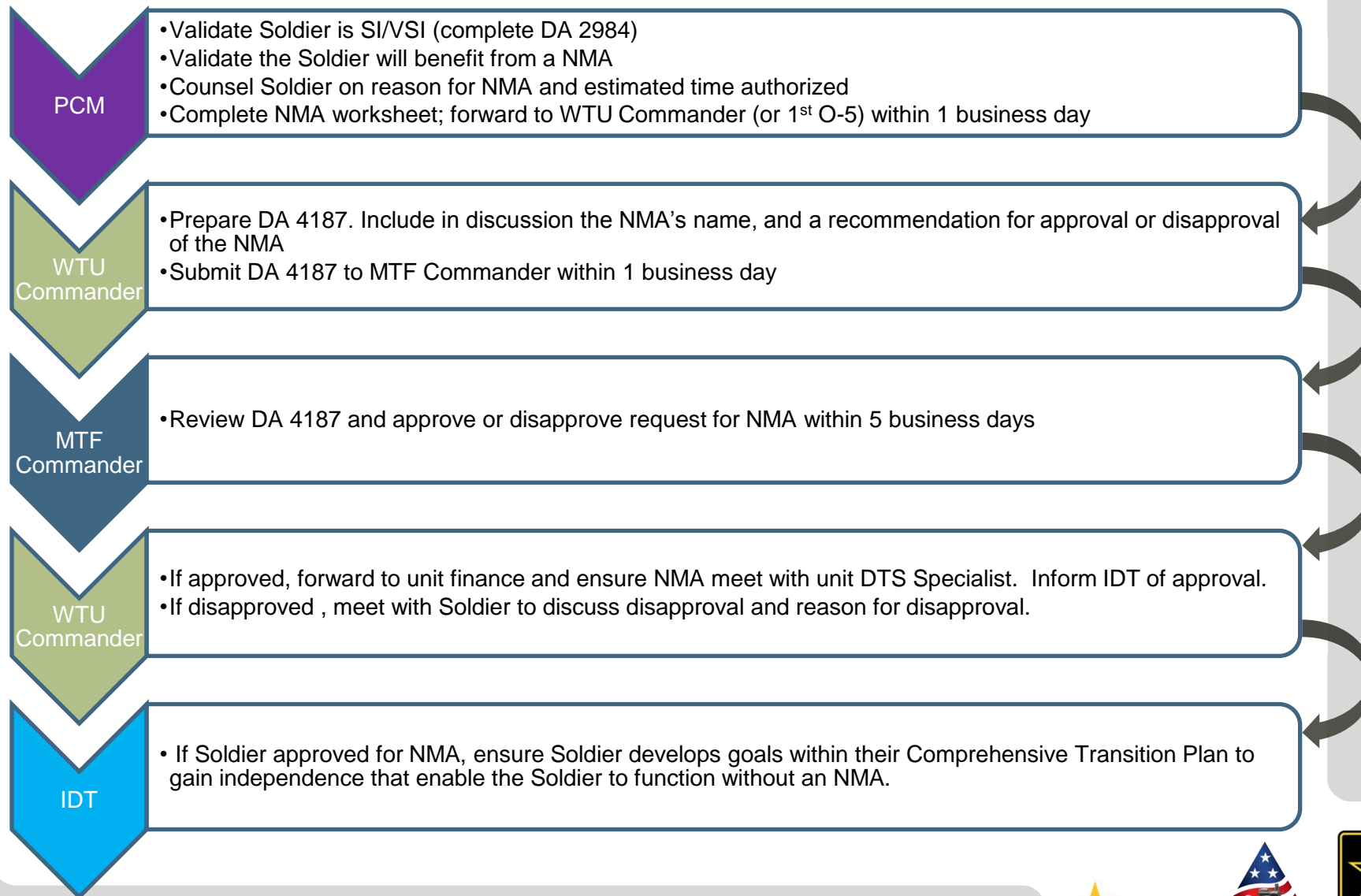
## SCENARIO 1

*Soldier, assigned to the WTU X 8 months, tells Squad Leader that he has been waking up in the middle of the night due to nightmares and wishes that he could have someone in his room for security.*

- Who/What determines if this Soldier is eligible?
- Can anyone recommend a Soldier be assessed for the need for a NMA?
- Is this Soldier eligible after 8 months without a NMA?



# PROCESS



IDT – Interdisciplinary Team





## HOW LONG CAN A NMA STAY?

- Based upon the Soldier's medical needs
- Initial orders can be up to 180 days
- Thirty (30) days prior to the end of the NMA orders, the PCM will re-evaluate the Soldier
  - If the Soldier continues to need support, the PCM will complete another PCM worksheet and forward to command as previously done.
  - If the Soldier no longer needs a NMA, the PCM will formally counsel the Soldier and NMA on rationale for discontinuing NMA orders.
  - Soldier may appeal to the RMC Commander.

**GOAL IS TO REACH INDEPENDENCE!**



# ULTIMATE GOAL - INDEPENDENCE



Fun



Activities of Daily Living

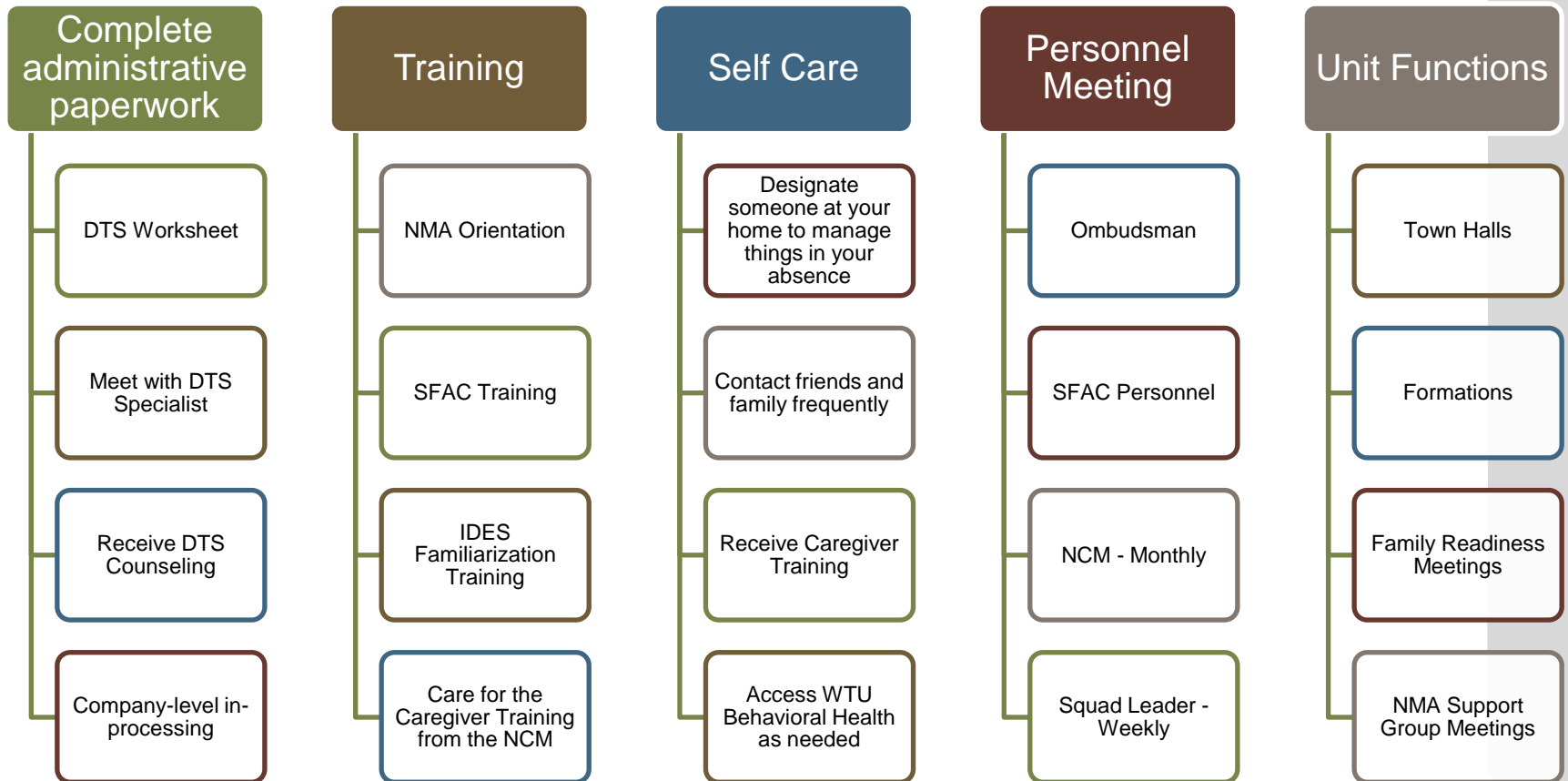


Work

# NON-MEDICAL ATTENDANTS – RESPONSIBILITIES



# NON-MEDICAL ATTENDANTS – DUTIES



# NON-MEDICAL ATTENDANTS – REMOVAL PROCEDURES

- If the NMA does not contribute to the Soldier's health and welfare or impedes the Soldier's ability to heal, recover, and transition, the WTU may remove the NMA status from the person.
- The WTU Commander and the MTF Commander are the approval authority for removal
  - If the Triad of Care witnesses or receives credible reports that a NMA is providing unsafe care or impeding the Soldier's ability to heal, recover, or transition, the Family Advocacy Program should be consulted.
  - The Staff Judge Advocate should be involved in all NMA removal proceedings.



# NMA ENTITLEMENTS

Not all NMAs qualify for all entitlements.

Per the Joint Federal Travel Regulation, entitlements include:

- Per Diem. This is pay to cover the expenses for food and incidentals.
  - If serving as a NMA at the Soldier's PDS, the NMA does not qualify for Per Diem Pay
  - If the Soldier goes on leave, the NMA is not paid per diem during the leave time.

NMA Per Diem Entitlements **ARE NOT** SCAADL Benefits.

SCAADL is a special monthly compensation for service members who incur a permanent catastrophic injury or illness. SCAADL helps offset the loss of income by a primary caregiver who provides non-medical care, support, and assistance for the service member.





## NMA ENTITLEMENTS

# Travel

One round trip ticket from their home to the hospital where the Soldier is receiving care

If the NMA drives from their home to the hospital where the Soldier is receiving care, can be reimbursed for mileage incurred during their trip

NMAs that reside in the Soldiers hospital's local commuting area are not entitled to tickets or reimbursement

NMA will not be reimbursed for travel to and from recreational events.

Costs incurred from driving the Soldier to and from medical appointments or therapies may be reimbursed.

Entitlements may change; refer to the JFTR for further guidance



## NMA ENTITLEMENTS

# Per Diem

Per Diem allowance covers the cost of lodging, meals, and incidents incurred by the NMA while supporting the Soldier. Lodging is only reimbursed if the NMA incurs a cost.

Per Diem is paid via the Defense Travel System on a monthly basis. The Unit DTS Specialist will assist the NMA to establish and maintain the DTS account.

Per Diem payments are not SCAADL payments. Per Diem payments go to the NMA and are to cover incidents while providing support to the Soldier

NMAs will not receive per diem pay while the Soldier is on official military leave.

**Entitlements may change; refer to the JFTR for further guidance**



## NMA ENTITLEMENTS

# Health Care

If Non-DEERS eligible, the NMA is entitled to evaluation and care on a space available basis at the local MTF.

The NMA must provide information on the their private health insurance to the MTF and the Soldier's NCM.

The NCM will assist with finding health care in the local area if needed.

Entitlements may change; refer to the JFTR for further guidance



# POLICIES PERTINENT TO NON-MEDICAL ATTENDANTS

- DoDI 1300.24
- Title 37 USC Section 481K
- JTFR
- AR 600-8-1
- AR 40-400
- ALARACT 171/2007
- WTC Consolidated Guidance



# CADRE RESPONSIBILITIES

## Commanders

- Provide oversight and guidance for the NMA Program
- Train cadre on the NMA Program
- Appoint a NMA Coordinator
- Ensure NMAs receive all required training
- Maintain accurate list of NMAs with contact information
- Proactively support the NMAs

# CADRE RESPONSIBILITIES

## NMA Coordinator

- Additional Duty
- Manage the NMA Program
- Proactively anticipate and manage NMA needs
- Ensure customer focus environment is maintained
- Remain current on all NMA-relevant policies and regulations
- Plan and execute NMA support groups
- Serve as the NMA Support Group facilitator
- Keep chain of command informed of NMA issues



# CADRE RESPONSIBILITIES

## Squad Leader

- Proactively identify Soldiers that may benefit from a NMA
- Counsel Soldiers and their NMAs on the NMA's entitlements, duties and responsibilities
- Counsel Soldier on their responsibilities
- Ensure Soldier and NMA attend required training and document attendance in Soldier's personnel file
- Maintain accurate NMA contact information
- Escort NMA to the DTS Specialist upon arrival to complete inprocessing
- Meet with NMA weekly
- Ensure Soldier initiates a Comprehensive Transition Plan goal for developing skills that facilitate independent living and enhanced resiliency

# CADRE RESPONSIBILITIES

## Nurse Case Manager

- Meet with Soldier and NMA on arrival and on a monthly basis. Orient to the role of NCM
- Provide “Care of the Caregiver” Training to the NMA upon arrival and refresh training throughout NMA stay as needed
- Assess NMA for burnout and decreased resiliency
- Coordinate for appropriate health care, including referral to WTU SW
- Train NMA on HIPAA related to the protection of the Soldiers’ health information
- Ensure Soldier has an appointment with PCM at least 30 days prior to the end of the NMA orders for a re-evaluation
- Assist the NMA with understanding required medical information that is relevant to the Soldiers care and meets HIPAA requirements
- Assist the Soldier in gaining independence

# CADRE RESPONSIBILITIES

## Primary Care Manager

- Complete the PCM-specific NMA training
- Validate the Soldier will benefit from a NMA and meets the eligibility criteria (SI/VSI)
- Counsel Soldier and NMA on the reason for the recommendation for the NMA and the anticipated length of time the NMA will be needed
- Communicate to the IDT the reason and anticipated length of time the NMA will be needed
- Complete the PCM worksheet within 1 day of validating need for NMA and forward to WTU Commander
- Assess the Soldier 30 days prior to the end of the NMA orders to determine if the Soldier has gained enough independence that they no longer would benefit from a NMA or if the NMA orders should be renewed.

# CADRE RESPONSIBILITIES

## Social Work

- Monitor resiliency of NMAs and Soldier
- Assess for signs of compassion fatigue and stress
- Help develop resiliency plans

## Chaplain

- Monitor resiliency of NMAs and Soldier
- Design programs to improve relationships

# CADRE RESPONSIBILITIES

## Soldier

- Carefully select a person to serve as a NMA
- Inform the PCM and Chain of Command of the individual they would like as their NMA
- Inform NMA of areas where support or assistance is needed
- Strive to gain independence by developing and implementing a proactive, engaged, and realistic CTP

## SCENARIO 2



- Soldier who was medically evacuated from theater for attempted suicide. Initially was admitted as an inpatient. Physician completed Seriously Ill (SI) paperwork while inpatient.
- Recently discharged. Stable on medications and group therapy. No longer SI.
- Soldier completes Self Assessment and identifies trigger points. Acknowledges group therapy is beneficial. Does not voice any suicidal thoughts.
- No immediate medical concerns.

*Does the Soldier meet the eligibility for a NMA?*





## SCENARIO 3

- Soldier is medically evacuated from theater after suffering from traumatic below the knee amputations and was considered VSI.
- Initial inpatient stay was for 6 months.
- Discharge from inpatient will happen in 1 week.
- Per inpatient team, Soldier is proficient in wheelchair and can complete transfer independently.
- Behavioral Health team notes Soldier is impulsive and they are concerned about Soldier's coping with loss.
- Soldier remains SI.



*Does the Soldier meet the eligibility for a NMA?*



## SCENARIO 4

- Soldier comes to the WTU from the Demob site for hip pain, low back pain, and high blood pressure.
- Soldier requires a hip replacement and is set for surgery next week. Per NCM, the physician did not list the Soldier as either SI or VSI. However, the Soldier will require assistance post surgery for 14 days.
- Soldier completes self assessment and lists no issues as he feels all his care needs are being met.
- Risk assessment level is low.

*Does the Soldier meet eligibility requirements?*



## SCENARIO 5

- Soldier's brother is serving as Soldier's NMA.
- Soldier has Traumatic Brain Injury, Post Traumatic Stress Disorder, and is an upper extremity amputee.
- Squad leader found NMA and Soldier intoxicated in the barracks room.



*What actions does the Squad Leader take?*

*Can the NMA be removed?*

*What if the NMA was the Soldier's wife?*

## SCENARIO 6

- NMA tells the Squad Leader that she has not been paid since she was placed on orders as a NMA, over 45 days ago.

*What actions does the Squad Leader take?  
Who else should be involved?*

